# MONTANA LEGISLATIVE HISTORY

Chapter 258 1997

Bill H _____ S 113 Original bill & history x C

| H. Committee on BUSINESS & LABOR | | | S. Committee on BUSINESS & INDUSTRY | | |
|---|---|---|---|---|---|
| Hearing Date(s) & EXEC. ACTION | 3/21 | x C | Hearing Date(s) | 1/23 | x C |
| | | C | EXEC. ACTION | 1/24 | x C |
| | | C | | | C |
| | | C | | | C |
| Date Out | | C | | | |

Did this bill originate in an interim committee? ____ Yes x No

Committee _____ Report _____

SENATE BILL NO. 113

INTRODUCED BY MCCARTHY

BY REQUEST OF THE STATE AUDITOR

A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE DEFINITION OF "INSURANCE-SUPPORT ORGANIZATION"; ALLOWING THE COMMISSIONER OF INSURANCE TO REVIEW INFORMATION COMPILED FOR USE IN AN INSURANCE TRANSACTION AND TO ORDER AN INSURANCE INSTITUTION, INSURANCE PRODUCER, OR INSURANCE-SUPPORT ORGANIZATION TO CORRECT, AMEND, OR DELETE INFORMATION THAT THE COMMISSIONER DETERMINES IS INAPPROPRIATE; REQUIRING THAT PERSONAL INFORMATION USED FOR INSURANCE UNDERWRITING BE ACCURATE; AND AMENDING SECTIONS 33-19-104, 33-19-302, AND 33-19-303, MCA."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

**Section 1.** Section 33-19-104, MCA, is amended to read:

**"33-19-104. Definitions.** As used in this chapter, the following definitions apply:

(1) (a) "Adverse underwriting decision" means any of the following actions with respect to insurance transactions involving insurance coverage that are individually underwritten:

(i) a declination of insurance coverage;

(ii) a termination of insurance coverage;

(iii) failure of an insurance producer to apply for insurance coverage with a specific insurance institution ~~which~~ that the insurance producer represents and ~~which~~ that is requested by an applicant;

(iv) in the case of a property or casualty insurance coverage:

(A) placement by an insurance institution or insurance producer of a risk with a residual market mechanism, an unauthorized insurer, or an insurance institution ~~which~~ that specializes in substandard risks; or

(B) the charging of a higher rate on the basis of information that differs from that which the applicant or policyholder furnished;

(v) in the case of a life, health, or disability insurance coverage, an offer to insure at higher than standard rates.

(b) The following actions are not adverse underwriting decisions, but the insurance institution or insurance producer responsible for their occurrence shall nevertheless provide the applicant or policyholder with the specific reason or reasons for their occurrence:

(i) the termination of an individual policy form on a class or statewide basis; ~~or~~

(ii) a declination of insurance coverage solely because ~~such~~ the coverage is not available on a class or statewide basis; or

(iii) the rescission of a policy.

(2) "Affiliate" or "affiliated" means a person ~~that~~ who directly or indirectly through one or more intermediaries controls, is controlled by, or is under common control with another person.

(3) "Applicant" means a person who seeks to contract for insurance coverage other than a person seeking group insurance that is not individually underwritten.

(4) "Consumer report" means any written, oral, or other communication of information bearing on a natural person's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living ~~which~~ that is used or expected to be used in connection with an insurance transaction.

(5) "Consumer reporting agency" means any person who:

(a) regularly engages, in whole or in part, in the practice of assembling or preparing consumer reports for a monetary fee;

(b) obtains information primarily from sources other than insurance institutions; and

(c) furnishes consumer reports to other persons.

(6) "Control", including the terms "controlled by" or "under common control with", means the possession, direct or indirect, of the power to direct or cause the direction of the management and policies of a person, whether through the ownership of voting securities, by contract other than a commercial contract for goods or nonmanagement services, or otherwise, unless the power is the result of an official position with or corporate office held by the person.

(7) "Declination of insurance coverage" means a denial, in whole or in part, by an insurance institution or insurance producer of requested insurance coverage.

(8) "Individual" means a natural person who:

(a) regarding property or casualty insurance, is a past, present, or proposed named insured or certificate holder;

(b) regarding life, health, or disability insurance, is a past, present, or proposed principal insured or certificate holder;

(c) is a past, present, or proposed policyowner;

(d) is a past or present applicant;

(e) is a past or present claimant; or

(f) derived, derives, or is proposed to derive insurance coverage under an insurance policy or certificate subject to this chapter.

(9) "Institutional source" means a person or governmental entity that provides information about an individual to an insurance producer, insurance institution, or insurance-support organization, other than:

(a) an insurance producer;

(b) the individual who is the subject of the information; or

(c) a natural person acting in a personal capacity rather than a business or professional capacity.

(10) "Insurance institution" means a corporation, association, partnership, reciprocal exchange, interinsurer, Lloyd's insurer, fraternal benefit society, or other person engaged in the business of insurance, including health maintenance organizations, and health service corporations as defined in 33-30-101. "Insurance institution" does not include insurance producers or insurance-support organizations.

(11) "Insurance producer" means an insurance producer as defined in 33-17-102 and 33-30-311.

(12) (a) "Insurance-support organization" means a person who ~~regularly engages, in whole or in part, in the practice of assembling or collecting~~ assembles or collects information about natural persons for the ~~primary~~ purpose of providing the information to an insurance institution or insurance producer for insurance transactions, including:

(i) the furnishing of consumer reports or investigative consumer reports to an insurance institution or insurance producer for use in connection with an insurance transaction; or

(ii) the collection of personal information from insurance institutions, insurance producers, or other insurance-support organizations for the purpose of detecting or preventing fraud, material misrepresentation, or material nondisclosure in connection with insurance underwriting or insurance claim activity.

(b) The following persons are not insurance-support organizations for purposes of this chapter: insurance producers, government institutions, ~~insurance institutions,~~ medical care institutions, and medical professionals.

(13) "Insurance transaction" means a transaction involving insurance primarily for personal, family, or household needs, rather than business or professional needs, that entails:

(a) the determination of an individual's eligibility for an insurance coverage, benefit, or payment; or

(b) the servicing of an insurance application, policy, contract, or certificate.

(14) "Investigative consumer report" means a consumer report or portion ~~thereof~~ of a consumer report containing information about a natural person's character, general reputation, personal characteristics, or mode of living obtained through personal interviews with the person's neighbors, friends, associates, acquaintances, or others who may have knowledge concerning ~~such items~~ this type of information.

(15) "Medical care institution" means a facility or institution that is licensed to provide health care services to natural persons, including but not limited to health maintenance organizations, home health agencies, hospitals, medical clinics, public health agencies, rehabilitation agencies, and skilled nursing facilities.

(16) "Medical professional" means a person who is licensed or certified to provide health care services to natural persons, including but not limited to a chiropractor, clinical dietitian, clinical psychologist, dentist, nurse, occupational therapist, optometrist, pharmacist, physical therapist, physician, podiatrist, psychiatric social worker, or speech therapist.

(17) "Medical record information" means personal information that:

(a) relates to an individual's physical or mental condition, medical history, or medical treatment; and

(b) is obtained from a medical professional or medical care institution, from the individual, or from the individual's spouse, parent, or legal guardian.

(18) "Person" means a natural person, corporation, association, partnership, or other legal entity.

(19) "Personal information" means any individually identifiable information gathered in connection with an insurance transaction from which judgments can be made about an individual's character, habits, avocations, finances, occupation, general reputation, credit, health, or any other personal characteristics. Personal information includes an individual's name and address and medical record information but does not include privileged information.

(20) "Policyholder" means a person who:

(a) in the case of individual property or casualty insurance, is a present named insured;

(b) in the case of individual life, health, or disability insurance, is a present policyowner; or

(c) in the case of group insurance that is individually underwritten, is a present group certificate holder.

(21) "Pretext interview" means an interview during which a person, in an attempt to obtain information about a natural person, performs one or more of the following acts:

(a) pretends to be someone ~~he~~ the person is not;

(b) pretends to represent a person ~~he is~~ not in fact ~~representing~~ being represented;

(c) misrepresents the true purpose of the interview; or

(d) refuses to identify ~~himself~~ the person performing the interview upon request.

(22) "Privileged information" means any individually identifiable information that:

(a) relates to a ~~claim for insurance benefits or a~~ civil or criminal proceeding involving an individual; and

(b) is collected in connection with or in reasonable anticipation of a claim for insurance benefits or civil or criminal proceeding involving an individual. Information otherwise meeting the requirements of privileged information under this subsection will be considered "personal information" under this chapter if it is disclosed in violation of 33-19-306.

(23) "Residual market mechanism" means an association, organization, or other entity defined or described in 61-6-144.

(24) "Termination of insurance coverage" or "termination of an insurance policy" means either a cancellation or nonrenewal of an insurance policy, in whole or in part, for any reason other than the failure to pay a premium as required by the policy.

(25) "Unauthorized insurer" means an insurance institution that has not been granted a certificate of authority by the commissioner to transact the business of insurance in this state."

**Section 2.** Section 33-19-302, MCA, is amended to read:

"**33-19-302. Correction, amendment, or deletion of recorded personal information.** (1) Within 30 business days from the date of receipt of a written request from an individual to correct, amend, or delete any recorded personal information in its possession about the individual, an insurance institution, insurance producer, or insurance-support organization shall either:

(a) correct, amend, or delete the portion of the recorded personal information in dispute; or

(b) notify the individual of:

(i) its refusal to make ~~such~~ the correction, amendment, or deletion;

(ii) the reasons for the refusal; and

(iii) the individual's right to file a statement as provided in subsection (3).

(2) If the insurance institution, insurance producer, or insurance-support organization corrects, amends, or deletes recorded personal information in accordance with subsection (1)(a), the insurance institution, insurance producer, or insurance-support organization shall ~~so~~ notify the individual in writing about the action that it has taken and furnish the correction, amendment, or fact of deletion to:

(a) any person specifically designated by the individual who may have, within the preceding 2 years, received ~~such~~ recorded personal information about the individual;

(b) any insurance-support organization whose primary source of personal information is insurance institutions if the insurance-support organization has systematically received ~~such~~ recorded personal information from the insurance institution within the preceding 7 years, but the correction, amendment, or fact of deletion need not be furnished if the insurance-support organization no longer maintains recorded personal information about the individual; and

(c) any insurance-support organization that furnished the personal information ~~which~~ that has been corrected, amended, or deleted.

(3) Whenever an individual disagrees with an insurance institution's, insurance producer's, or insurance-support organization's refusal to correct, amend, or delete recorded personal information, the individual may file with the insurance institution, insurance producer, or insurance-support organization:

(a) a concise statement setting forth what the individual thinks is the correct, relevant, or fair information; and

(b) a concise statement of the reasons why the individual disagrees with the insurance institution's, insurance producer's, or insurance-support organization's refusal to correct, amend, or delete recorded personal information.

(4) If an individual files either statement described in subsection (3), the insurance institution, insurance producer, or insurance-support organization shall:

(a) file the statement with the disputed personal information and provide a means by which anyone reviewing the disputed personal information will be made aware of the individual's statement and have

access to it;

(b) in any subsequent disclosure by the insurance institution, insurance producer, or insurance-support organization of the recorded personal information that is the subject of disagreement, clearly identify the matter in dispute and provide the individual's statement along with the recorded personal information being disclosed; and

(c) furnish the statement to the persons in the manner specified in subsection (2).

(5) The commissioner may review a refusal by an insurance institution, insurance producer, or insurance-support organization to correct, amend, or delete recorded personal information in order to determine if the refusal is reasonable. The commissioner may order the insurance institution, insurance producer, or insurance-support organization to correct, amend, or delete information that the commissioner determines is inappropriate in an individual's recorded information file.

(6) The rights granted individuals by this section extend to all natural persons to the extent information about them is collected and maintained by an insurance institution, insurance producer, or insurance-support organization in connection with an insurance transaction. The rights granted to natural persons by this subsection do not extend to information about them that relates to and is collected in connection with or in reasonable anticipation of a claim or civil or criminal proceeding involving them.

~~(6)~~(7) For the purposes of this section, the term "insurance-support organization" does not include a consumer reporting agency."

**Section 3.** Section 33-19-303, MCA, is amended to read:

"**33-19-303. Reasons for adverse underwriting decisions.** (1) If an adverse underwriting decision is made, the insurance institution or insurance producer responsible for the decision shall:

(a) either provide the applicant, policyholder, or individual proposed for coverage with the specific reason or reasons for the adverse underwriting decision in writing or advise ~~such~~ the person that upon written request, ~~he~~ the person may receive the specific reason or reasons in writing; and

(b) provide the applicant, policyholder, or individual proposed for coverage with a summary of the rights established under subsection (2) and 33-19-301 and 33-19-302.

(2) If a written request is received within 90 business days from the date of the mailing of notice or other communication of an adverse underwriting decision to an applicant, policyholder, or individual proposed for coverage, the insurance institution or insurance producer shall within 21 business days from

the date of receipt of the written request furnish the person:

(a) the specific reason or reasons for the adverse underwriting decision, in writing, if ~~such~~ the information was not initially furnished in writing pursuant to subsection (1)(a);

(b) the specific items of personal and privileged information that support those reasons; however:

(i) the insurance institution or insurance producer is not required to furnish specific items of privileged information if it has a reasonable suspicion, based upon specific information available for review by the commissioner, that the applicant, policyholder, or individual proposed for coverage has engaged in criminal activity, fraud, material misrepresentation, or material nondisclosure; and

(ii) specific items of medical record information supplied by a medical care institution or medical professional ~~shall~~ must be disclosed either directly to the individual about whom the information relates or to a medical professional designated by the individual and licensed to provide medical care with respect to the condition to which the information relates, whichever the insurance institution or insurance producer prefers; and

(c) the names and addresses of the institutional sources that supplied the specific items of information pursuant to subsection (2)(b), except that the identity of any medical professional or medical care institution must be disclosed either directly to the individual or to the designated medical professional, whichever the insurance institution or insurance producer prefers.

(3) The obligations imposed by this section upon an insurance institution or insurance producer may be satisfied by another insurance institution or insurance producer that is authorized to act on its behalf.

(4) When an adverse underwriting decision results solely from an oral request or inquiry, the explanation of reasons and summary of rights required by subsection (1) may be given orally but must be made in writing at the request of the applicant, policyholder, or individual.

(5) An insurance institution or insurance producer responsible for an adverse underwriting decision may not use information that the insurance institution or insurance producer has reason to believe is erroneous."

-END-

| | | | |
|---|---|---|---|
| 2/17 | 3RD READING PASSED | 50 | 0 |
| | TRANSMITTED TO HOUSE | | |
| 2/21 | FIRST READING | | |
| 2/21 | REFERRED TO BUSINESS & LABOR | | |
| 3/11 | REVISED FISCAL NOTE REQUESTED | | |
| 3/11 | REVISED FISCAL NOTE RECEIVED | | |
| 3/11 | REVISED FISCAL NOTE PRINTED | | |
| 3/12 | HEARING | | |
| 3/13 | COMMITTEE REPORT—BILL CONCURRED AS AMENDED | | |
| 4/03 | 2ND READING CONCURRED | 79 | 19 |
| 4/04 | 3RD READING CONCURRED | 84 | 15 |
| | RETURNED TO SENATE WITH AMENDMENTS | | |
| 4/08 | 2ND READING AMENDMENTS CONCURRED | 50 | 0 |
| 4/09 | 3RD READING CONCURRED AS AMENDED | 50 | 0 |
| 4/14 | SIGNED BY PRESIDENT | | |
| 4/15 | SIGNED BY SPEAKER | | |
| 4/15 | TRANSMITTED TO GOVERNOR | | |
| 4/17 | SIGNED BY GOVERNOR | | |
| | CHAPTER NUMBER 298 | | |
| | EFFECTIVE DATE: 10/01/97 | | |

SB 113 INTRODUCED BY MCCARTHY *LC0393 DRAFTER: MALY*

REVISE THE DEFINITION OF "INSURANCE-SUPPORT ORGANIZATION"

BY REQUEST OF STATE AUDITOR

| | | | |
|---|---|---|---|
| 1/01 | INTRODUCED | | |
| 1/03 | REFERRED TO BUSINESS & INDUSTRY | | |
| 1/06 | FIRST READING | | |
| 1/23 | HEARING | | |
| 1/30 | COMMITTEE REPORT—BILL PASSED AS AMENDED | | |
| 2/04 | 2ND READING PASSED | 50 | 0 |
| 2/05 | 3RD READING PASSED | 50 | 0 |
| | TRANSMITTED TO HOUSE | | |
| 2/06 | FIRST READING | | |
| 2/06 | REFERRED TO BUSINESS & LABOR | | |
| 3/21 | HEARING | | |
| 3/22 | COMMITTEE REPORT—BILL CONCURRED | | |
| 4/03 | 2ND READING CONCURRED | 93 | 5 |
| 4/04 | 3RD READING CONCURRED | 93 | 6 |
| | RETURNED TO SENATE | | |
| 4/08 | SIGNED BY PRESIDENT | | |
| 4/08 | SIGNED BY SPEAKER | | |
| 4/09 | TRANSMITTED TO GOVERNOR | | |
| 4/14 | SIGNED BY GOVERNOR | | |
| | CHAPTER NUMBER 258 | | |
| | EFFECTIVE DATE: 10/01/97 | | |

SB 114 INTRODUCED BY WATERMAN *LC0430 DRAFTER: FOX*

REVISE THE LAWS RELATING TO LIABILITY FOR A RESIDENT'S COST OF CARE IN A STATE INSTITUTION

BY REQUEST OF DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

| | | | |
|---|---|---|---|
| 1/01 | INTRODUCED | | |
| 1/03 | REFERRED TO STATE ADMINISTRATION | | |
| 1/03 | FISCAL NOTE REQUESTED | | |
| 1/06 | FIRST READING | | |
| 1/13 | FISCAL NOTE RECEIVED | | |
| 1/14 | FISCAL NOTE PRINTED | | |



| | | | |
|---|---|---|---|
| 1/16 | SPONSOR FISCAL NOTE REQUESTED | | |
| 1/17 | HEARING | | |
| 1/17 | SPONSOR FISCAL NOTE RECEIVED | | |
| 1/17 | SPONSOR FISCAL NOTE PRINTED | | |
| 1/23 | COMMITTEE REPORT—BILL PASSED AS AMENDED | | |
| 1/25 | 2ND READING PASSED | 41 | 5 |
| 1/27 | 3RD READING PASSED | 48 | 2 |
| | TRANSMITTED TO HOUSE | | |
| 1/28 | FIRST READING | | |
| 1/28 | REFERRED TO HUMAN SERVICES & AGING | | |
| 3/07 | HEARING | | |
| 3/10 | COMMITTEE REPORT—BILL CONCURRED AS AMENDED | | |
| 3/15 | 2ND READING CONCURRED | 83 | 12 |
| 3/17 | 3RD READING CONCURRED | 86 | 14 |
| | RETURNED TO SENATE WITH AMENDMENTS | | |
| 3/19 | 2ND READING AMENDMENTS CONCURRED | 50 | 0 |
| 3/20 | 3RD READING CONCURRED AS AMENDED | 50 | 0 |
| 3/24 | SIGNED BY PRESIDENT | | |
| 3/26 | SIGNED BY SPEAKER | | |
| 3/26 | TRANSMITTED TO GOVERNOR | | |
| 4/01 | SIGNED BY GOVERNOR | | |
| | CHAPTER NUMBER 190 | | |
| | EFFECTIVE DATE: 04/01/97—SECTIONS 2 & 18 | | |
| | EFFECTIVE DATE: 07/01/97—SECTIONS 1 & 3-17 | | |

SB 115 INTRODUCED BY NELSON *LC0100 DRAFTER: STERNBERG*

ALLOW SUPERVISED RESIDENTS OF LICENSED LONG-TERM CARE FACILITIES, NURSING CARE FACILITIES, PERSONAL CARE FACILITIES, AND COMMUNITY HOMES FOR PERSONS WITH DISABILITIES TO FISH WITHOUT A LICENSE UPON ANNUAL APPLICATION BY MANAGERS OR DIRECTORS OF THE FACILITIES OR HOMES

| | | | |
|---|---|---|---|
| 1/01 | INTRODUCED | | |
| 1/03 | REFERRED TO FISH & GAME | | |
| 1/06 | FIRST READING | | |
| 1/14 | HEARING | | |
| 1/17 | COMMITTEE REPORT—BILL PASSED AS AMENDED | | |
| 1/20 | 2ND READING PASSED AS AMENDED | 49 | 0 |
| 1/21 | 3RD READING PASSED | 49 | 0 |
| | TRANSMITTED TO HOUSE | | |
| 1/23 | FIRST READING | | |
| 1/23 | REFERRED TO FISH, WILDLIFE & PARKS | | |
| 2/20 | HEARING | | |
| 2/21 | COMMITTEE REPORT—BILL CONCURRED | | |
| 3/05 | 2ND READING CONCURRED | 95 | 5 |
| 3/06 | 3RD READING CONCURRED | 94 | 5 |
| | RETURNED TO SENATE | | |
| 3/10 | SIGNED BY PRESIDENT | | |
| 3/12 | SIGNED BY SPEAKER | | |
| 3/13 | TRANSMITTED TO GOVERNOR | | |
| 3/17 | SIGNED BY GOVERNOR | | |
| | CHAPTER NUMBER 77 | | |
| | EFFECTIVE DATE: 10/01/97 | | |

SB 116 INTRODUCED BY NELSON *LC0124 DRAFTER: CAMPBELL*

ALLOW AN APPLICANT FOR A USED MOTOR VEHICLE DEALER'S LICENSE TO MAINTAIN A PERMANENT NONRESIDENTIAL BUILDING FOR

# MINUTES

## MONTANA SENATE
## 55th LEGISLATURE - REGULAR SESSION

## COMMITTEE ON BUSINESS & INDUSTRY

**Call to Order:** By **CHAIRMAN JOHN HERTEL**, on January 23, 1997, at 9:00 A.M., in ROOM 410.

### ROLL CALL

**Members Present:**
Sen. John R. Hertel, Chairman (R)
Sen. Steve Benedict, Vice Chairman (R)
Sen. Debbie Bowman Shea (D)
Sen. William S. Crismore (R)
Sen. C.A. Casey Emerson (R)
Sen. Bea McCarthy (D)

**Members Excused:** None

**Members Absent:** None

**Staff Present:** Bart Campbell, Legislative Services Division
Mary Gay Wells, Committee Secretary

**Please Note:** These are summary minutes. Testimony and discussion are paraphrased and condensed.

**Committee Business Summary:**
Hearing(s) & Date(s) Posted: SB 113, SB 116, SB 118; 1/13/97
Executive Action: None

*{Tape: 1; Side: A; Approx. Time Count: 9:02 AM; Comments: N/A.}*

### HEARING ON SB 116

Sponsor: **SENATOR LINDA NELSON, SD 49, MEDICINE LAKE**

Proponents: **Dave Brown, Butte, Director, Independent Automobile Dealers Assoc.**
**Dean Roberts, MT Department of Justice**

Opponents: **None.**

Opening Statement by Sponsor:

**SENATOR LINDA NELSON, SD 49, MEDICINE LAKE**, said SB 116 eased the requirement that every single used car lot needed a permanent business building to house the records. She said when the 1993

Committee wanted to give SB 116 careful consideration before acting on it, it was OK.

*{Tape: 1; Side: A; Approx. Time Count: 9:18 a.m.}*

## HEARING ON SB 113

**Sponsor:** **SEN. BEA MCCARTHY, SD 29, Anaconda**

**Proponents:** **Frank Cote, Department of Insurance Commission**
**Ward Shanahan, Farmers Insurance Group**
**Susan Good, Montana Association of Life Underwriters**
**Roger McGlenn, Independent Agents Association of Montana**
**Tom Hopgood, Health Insurance Association of America**

**Opponents:** **Greg Van Horssen, State Farm Insurance Company**
**Larry Akey, National Association of Independent Insurers**
**Jacqueline Lenmark, American Insurance Association**
**Russell Hill, Montana Trial Lawyers Association**
**Rose Hughes, Alliance of American Insurers**

**Opening Statement by Sponsor:**

**SEN. BEA MCCARTHY, SD 29, Anaconda,** said she carried SB 113 for the State Auditor and it did three things: (1) Redefined an insurance support organization, which is a person or entity collecting information about people to provide to an insurer or producer for insurance transactions; (2) Allowed, on complaint by the consumer, the commissioner to review the information collected so the commissioner could determine if the information was correct and if it was used by the insurer to refuse coverage; (3) Allowed the consumer to request in writing information from his or her central file. **SEN. MCCARTHY** said SB 113 also prohibited the insurer or producer to use information the parties believed to be erroneous, i.e. same protection Montanans receive under credit reporting laws. She distributed and explained the amendments in **(EXHIBIT 1).**

**Proponents' Testimony:**

**Frank Cote, Deputy Insurance Commissioner,** said the Department had received numerous complaints from the consumers regarding use of information in reports by insurers in the area of underwriting, homeowners and auto insurance. He said consumers were telling the Department the information gathered was often inaccurate but was used by the insurance companies to refuse coverage. **Mr. Cote** stated most of the time consumers had not been able to get the insurers to correct, amend or delete the misinformation from the report and that was why the consumers came to the Department. He declared the Department had no authority to require an insurance reporting entity to change erroneous information. **Mr. Cote** informed the Committee SB 113

allowed them the authority to order the reporting entity to correct the erroneous information, which he anticipated would be done through the regular hearing process. He used an illustration to depict what he meant and then said these records were permanent and followed a person for life so it was important they contained correct information.

**Ward Shanahan, Farmers Insurance Group,** said he supported the general intent of SB 113 and he supported Mr. Cote's proposed changes; however, they did not go far enough. He referred to Page 7, Subsection (5), Lines 7-11, and suggested striking "refusal as reasonable" and inserting "information is correct" because the Commissioner had the power to review the refusal of underwriting to determine if the information was correct. He then referred to Page 8, Line 23, Subsection (5), and said if an underwriter could be accused of knowing something was wrong before he or she made the decision, it would be a criminal action. **Mr. Shanahan** reiterated correct information was attempted to be provided which would make the provision unnecessary. He remarked the Commissioner used the super information network and it could be erroneous. He suggested if the intent was to correct information, that should be addressed; if they wanted to get into reasons why people did things, another proceeding should be used. He summarized by saying he felt the issue was correct information and the proposed change would accomplish that.

**Susan Good, Montana Association of Life Underwriters,** said they were interested in Mr. Shanahan's comments and would be in strong support of SB 113 if those amendments were added because the bill's intent of correct information would be ensured.

**Roger McGlenn, Independent Agents Association of Montana,** expressed support for SB 113 with the recommended amendments. He said some of his agents had experienced erroneous information.

**Tom Hopgood, Health Insurance Association of America,** expressed support for SB 113 with the suggested amendments; also, he strongly suggested examining the Montana Administrative Procedures Act to see if it were applicable to the review. He said if it was not, they would endorse an amendment to see that it was.

***{Tape: 1; Side: A; Approx. Time Count: 9:32 a.m.}***

Opponents' Testimony:

**Greg Van Horssen, State Farm Insurance Company,** said his company had some concerns in Section 2, Subsection (5), together with Section 3, Subsection (5), explaining it appeared the insurance commissioner was allowed the unilateral authority to order an insurance company to remove information from its files. He reminded the Committee there already was a process in place whereby the insurer could challenge or appeal the insurance

company's decision on the information deemed erroneous. **Mr. Van Horssen** said the difficulty was the language allowed for correction, amendment or deletion according to the commissioner's decision on what was to be done with the information. He charged the Committee the concern should be: (1) How the decision would be made by the commissioner; (2) Would the commissioner's decision (if different from the insurance company's) trigger an administrative formal hearing process to determine if the insurance could or could not keep that information in its files. **Mr. Van Horssen** submitted the decision should be left to the discretion of the insurer to leave or delete the information in the file. He referred to Section 3, Subsection (5), and said State Farm would agree with removing it in its entirety. He stated the difficulty was the language saying the insurance producer had reason to believe the information was erroneous; however, the question to be raised was what threshold would create the obligation for the insurance company -- a phone call from the insurer? **Mr. Van Horssen** suggested the language be more clear.

**Larry Akey, National Association of Independent Insurers (NAII),** expressed opposition for SB 113, explaining the amendments proposed by the Commissioner's office and by Ward Shanahan ameliorated their concerns. However, they were still concerned, even if the Committee voted to include the amendments with SB 113, because the Insurance Commissioner's office would have the public believe insurance companies made money by capriciously denying coverage. He explained that was not true because there was already in place a very detailed opportunity for the insurance consumer to ask for the information to be corrected without interjecting the commissioner's judgment. **Mr. Akey** wondered why a commissioner's office which already was overworked and understaffed, would want to get involved when a mechanism was already in place which would address the issue. He suggested the Committee adopt both sets of amendments if they passed SB 113; however, it was their preference the bill be left on the table.

**Jacqueline Lenmark, American Insurance Association (AIA),** expressed opposition for SB 113 in its current form but supported the suggested amendments because the bill would be made better. However, AIA agreed with NAII the amendments still would not make SB 113 a better bill. She cited previous testimony in which it was stated the attempt was made to make those laws parallel to the credit reporting laws but SB 113 went farther than the remedies available to an individual in a credit reporting situation. She explained in the credit reporting, a mechanism was available which was very similar to what was in Subsection (4); a requirement that a reporting agency carry in file and highlight in file when an applicant disputed the agency's information. **Ms. Lenmark** suggested the enforcement of that mechanism be strengthened to allow both the collecting agency and the applicant to correct the information. She informed the Committee if the suggested amendments would be added to SB 113, they would not mind it too much; however, they still could not

give it wholehearted support but would be willing to work on additional amendments.

**Russell Hill, Montana Trial Lawyers Association,** said he agreed with Larry Akey, explaining if the amendments were adopted the bill was virtually gutless and a waste of paper. He called the Committee's attention to the last amendment on Page 8, Lines 23-25, and said it didn't matter what was done with enforcement and the commissioner's power but the Committee needed to be upfront with both sides of the recommendations of the insurance industry. He explained the insurance company was uncomfortable with language which prevented the insurance company from using the information they had reason to believe was erroneous. It was **Mr. Hill's** opinion that language should remain in SB 113.

**Rose Hughes, Alliance of American Insurers,** said they had the same concerns as the others. She said Mr. Shanahan's amendments addressed the issues but the Alliance felt SB 113 was unnecessary because there currently were laws on the books to deal with those situations. **Ms. Hughes** expressed concern for the language on Page 8, saying it was not a question of using information they truly believed was erroneous; however, the problem was the issue of reason to believe because they were concerned any time an insurer disputed information, it might be deemed they had reason to believe it was not correct. Therefore, the insured would always have the ultimate say in what could be and not be used. **Ms. Hughes** reiterated the main concern was being precluded from using information they had a right to use.

Questions From Committee Members and Responses:

**SEN. STEVE BENEDICT** asked what happened to SB 113 proponents and opponents coming with prepared amendments. **Ward Shanahan** said he did not know the Commissioner's Office was planning to amend SB 113 until about ten minutes before he entered the hearing. He offered to prepare the amendments and mail them to **SEN. JOHN HERTEL**, if that would be acceptable. **Mr. Shanahan** said if it was the Commissioner's intent to provide correct information, Farmer's Insurance Group did not wish to be on record as opposing legislation for decent consumer information. **SEN. BENEDICT** commented he hoped the lobbyists would take note and be sure to bring written instead of conceptual amendments. **Mr. Shanahan** said in the future he would do that to the best of his ability.

**SEN. JOHN HERTEL** stressed the amendments should be given to a member of the Committee who would request legal services to draw them up.

*{Tape: 1; Side: B; Approx. Time Count: 9:48 p.m.}*

**SEN. BENEDICT** asked **Frank Cote** if he could live with the amendments proposed by Ward Shanahan and was told he could live with the first proposed amendment but was not as happy with deleting Subsection (5) on Page 8. **Mr. Cote** said he would rather

have a bill which gave some authority to help people correct erroneous information in their file. **SEN. BENEDICT** asked what SB 113 did if Mr. Cote could live with the amendments. **Mr. Cote** said SB 113 with the proposed conceptual amendments gave the Commissioner the ability to review a refusal to determine if the information used in the refusal was correct (Page 7, Subsection (5) and to order the correction, deletion, etc., of that information. **SEN. BENEDICT** asked if the Commissioner could currently do that and **Mr. Cote** answered, "Not in all cases."

Closing by Sponsor:

**SEN. BEA MCCARTHY** thanked the Committee for a good hearing and said they would incorporate the two amendments proposed by Ward Shanahan. She responded to **SEN. BENEDICT** by saying yesterday morning Mr. Cote had informed her amendments were being worked on so **SEN. HERTEL** was approached about delaying the hearing. They were told it was not possible because of public notice. **SEN. MCCARTHY** told the Committee she hoped for a DO PASS.

*{Tape: 1; Side: B; Approx. Time Count: 10:05 a.m.}*

## HEARING ON SB 118

Sponsor: **SEN. WILLIAM CRISMORE, SD 41, Libby.**

Proponents: **Nancy Ellery, Health Policy & Services Division**
**Pat Anderson, Montana Bed & Breakfast Association**
**Bud Williams, Innkeepers Association**
**Bobbi Uecker, The Sanders, Helena's Bed & Breakfast**
**Jean Johnson, Outfitters & Guides**
**Page Dringman, Montana Ranch Vacation Association**
**Rhonda Carpenter, Montana Housing Providers**
**Marc Steinberg, Skylodge Bed & Breakfast**
**Jean Roberts, White Sulphur Springs Bed & Breakfast**

Opponents: **None.**

Opening Statement by Sponsor:

**SEN. WILLIAM CRISMORE, SD 41, Libby,** said SB 118 dealt with: (1) Defining "bed & breakfast"; (2) Defining "establishment"; (3) Defining the Department of Public Health & Human Services' rulemaking authority with regard to trailer courts and campgrounds; (4) Allowing for staggered license dates for public accommodations, trailer courts and campground establishments; (5) Specifying trailer court or campground rights to renewal of licenses. **SEN. CRISMORE** explained when SB 118 began it was ten pages; however, it was now four pages, even with the amendments he would be offering. **(EXHIBIT 2)** He also distributed copies of a written testimony from **Amy A. MacKenzie** he had received. **(EXHIBIT 3)**

SENATE BUSINESS & INDUSTRY
EXHIBIT NO. 1
DATE 1-23-97
BILL NO. SB 113

Proposed Amendment #1
S.B. 113
Introduced Bill Copy
January 23, 1997

1. Title, line 9.
Strike: "INAPPROPRIATE"
Insert: ~~"INCORRECT"~~ amendments

2. Page 7, line 11.
Strike: "inappropriate"
Insert: "~~incorrect~~" amendments

MONTANA SENATE
1997 LEGISLATURE
BUSINESS AND INDUSTRY COMMITTEE

ROLL CALL DATE 1-23-97

| NAME | PRESENT | ABSENT | EXCUSED |
|---|---|---|---|
| WILLIAM CRISMORE | X | | |
| CASEY EMERSON | X | | |
| BEA MC CARTHY | X | | |
| DEBBIE SHEA | X | | |
| STEVE BENEDICT, VICE CHAIRMAN | X | | |
| JOHN HERTEL, CHAIRMAN | X | | |
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DATE 1-23-97

SENATE COMMITTEE ON Bus. & Ind.

BILLS BEING HEARD TODAY: SB 113, 116, 118

< ■ > PLEASE PRINT < ■ >

| Name | Representing | Bill No. | Check One: Support | Oppose |
|---|---|---|---|---|
| Dennis Williams | InnKeepers Assoc | SB 118 | ✓ | |
| Jean Roberts | Montana Wildlife Federation White Sulphur Springs | SB 118 | ✓! | |
| Pat Anderson | Mont B+B Assn | SB 118 | | |
| Bobbi Hecker | The Sanders Helena's B&B | | | |
| Marc Steinberg | Sky Lodge B+B | | | Amend |
| Debra Steinberg | Sky Lodge B+B | | | amend |
| Dean Roberts | DOJ motor Vehicle Div | | Informational | |
| Greg Van Horssen | State Farm Ins | SB113 | | ✓ |
| Ron Hughes | AAI | SB113 | | amend |
| Larry Akey | NAII | SB113 | | ✓ |
| Frank Cote | St. Andrew Ins | SB113 | ✓ | |
| Jacqueline Bergmark | Am Ins Assn | SB113 | | ✓ |
| Gerald Shamaker | Farmers Ins. Group | SB113 | AMEND | |
| Cheryl Boid | Appleton Inn | SB118 | | |

VISITOR REGISTER

PLEASE LEAVE PREPARED STATEMENT WITH COMMITTEE SECRETARY

DATE 1-23-97

SENATE COMMITTEE ON Sen Business Dev

BILLS BEING HEARD TODAY: 113, 116, 118

< ■ > PLEASE PRINT < ■ >

| Name | Representing | Bill No. | Check One: Support | Check One: Oppose |
|---|---|---|---|---|
| DAVE BROWN | MT Independent Auto Dealers Assn | SB-114 | w/Amdt | |
| Dave Turkiewicz | MT. Auto Dealers Assn | SB116 | X | |
| Susan Good | MALU | SB 113 | X | Amend |
| Roger McGlenn | IIAM | SB113 | AMEND | |
| Ronda Carpenter | MT Housing Providers | SB 118 | X w/amendments | |
| Nancy Ellery | DPHHS | SB 118 | ✓ | |
| Gael Ellison | MT Outfitters & Guides | SB 118 | ✓/amended | |
| Mary Bolch | DPHHS | SB 118 | ✓ | |
| Russ Ball | MT Trial Lawyers | SB 113 | | ✓ |
| Mitzi Schwab | DPHHS | SB 118 | ✓ | |
| Page Dringman | MT Bench Vacation Assn | SB 118 | | |
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VISITOR REGISTER

PLEASE LEAVE PREPARED STATEMENT WITH COMMITTEE SECRETARY

REGISTER.F10

# MINUTES

## MONTANA SENATE
## 55th LEGISLATURE - REGULAR SESSION

## COMMITTEE ON BUSINESS & INDUSTRY

**Call to Order:** By **CHAIRMAN JOHN HERTEL**, on January 29, 1997, at 9:00 A.M., in ROOM 410.

### ROLL CALL

**Members Present:**
Sen. John R. Hertel, Chairman (R)
Sen. Steve Benedict, Vice Chairman (R)
Sen. Debbie Bowman Shea (D)
Sen. William S. Crismore (R)
Sen. C.A. Casey Emerson (R)
Sen. Bea McCarthy (D)

**Members Excused:** None

**Members Absent:** None

**Staff Present:** Bart Campbell, Legislative Services Division
Mary Gay Wells, Committee Secretary

**Please Note:** These are summary minutes. Testimony and discussion are paraphrased and condensed.

**Committee Business Summary:**
Hearing(s) & Date(s) Posted: SB 169; SB 181; HB 16; 1/20/97
Executive Action: SB 113; SB 118; HB 16
SB 111 & SB 112 TABLED

### HEARING ON SB 181

*{Tape: 1; Side: A; Approx. Time Count: 9:03 AM; Comments: N/A.}*

Sponsor: SENATOR DONALD HARGROVE, SD 16, BOZEMAN

Proponents: Mike Garrity, Attorney, Bozeman, West Yellowstone Tavern Owners
Harry W. Klock, President, MT Tavern Assoc.
Bill Howell, West Yellowstone Conference Hotel
Clyde Seeley, Three Bear Lodge
Chuck Bostrom, Superintendent of School District 69, West Yellowstone, MT
Timothy Daley, citizen

Glenn Lumis, Mayor, West Yellowstone

Motion/Vote: SEN. STEVE BENEDICT MOVED TO TABLE SB 112. Motion CARRIED UNANIMOUSLY 6-0.

## EXECUTIVE ACTION ON SB 113

Motion: SEN. BEA MCCARTHY MOVED DO PASS ON SB 113.

Amendments: SEN. BEA MCCARTHY MOVED DO PASS ON AMENDMENTS (EXHIBIT 25)

Discussion: SEN. MCCARTHY explained the amendments were offered by the Farmers Insurance Group.

SEN. BENEDICT said he also had visited with most of the insurers involved and all concurred on the amendments.

Vote: Motion DO PASS ON AMENDMENTS sb 011301.abc CARRIED UNANIMOUSLY 6-0.

Motion/Vote: SEN. BEA MCCARTHY MOVED DO PASS ON SB 113 AS AMENDED. Motion CARRIED UNANIMOUSLY 6-0.

## EXECUTIVE ACTION ON SB 118

Motion: SEN. WILLIAM CRISMORE MOVED DO PASS ON SB 118.

Amendments: SEN. WILLIAM CRISMORE MOVED DO PASS ON AMENDMENTS (EXHIBIT 26)

Discussion: SEN. WILLIAM CRISMORE said all amendments except #5 & #11 were in the original.

Motion: Motion DO PASS ON AMENDMENTS CARRIED UNANIMOUSLY 6-0.

Motion/Vote: SEN. WILLIAM CRISMORE MOVED DO PASS FOR SB 118 AS AMENDED. Motion CARRIED UNANIMOUSLY 6-0.

## EXECUTIVE ACTION ON HB 16

Motion/Vote: SEN. BEA MCCARTHY MOVED DO CONCUR FOR HB 16. Motion CARRIED UNANIMOUSLY 6-0.

SENATE BUSINESS & INDUSTRY
EXHIBIT NO. 25
DATE 1-29-97
BILL NO. SB 113

Amendments to Senate Bill No. 113
First Reading Copy

For the Committee on Business and Industry

Prepared by Bart Campbell
January 25, 1997

1. Title, line 9.
Strike: "INAPPROPRIATE"
Insert: "ERRONEOUS"

2. Page 7, line 9.
Strike: "refusal is reasonable"
Insert: "information is correct"

3. Page 7, line 11.
Strike: "inappropriate"
Insert: "erroneous"

4. Page 8, line 23.
Strike: subsection (5) in its entirety

**SENATE STANDING COMMITTEE REPORT**


January 29, 1997

MR. PRESIDENT:

We, your committee on Business and Industry having had under consideration SB 113 (first reading copy -- white), respectfully report that SB 113 be amended as follows and as so amended do pass.

Signed: John Hertel
Senator John R. Hertel, Chair

That such amendments read:

1. Title, line 9.
Strike: "INAPPROPRIATE"
Insert: "ERRONEOUS"

2. Page 7, line 9.
Strike: "refusal is reasonable"
Insert: "information is correct"

3. Page 7, line 11.
Strike: "inappropriate"
Insert: "erroneous"

4. Page 8, line 23.
Strike: subsection (5) in its entirety

-END-

Amd. Coord.
Sec. of Senate

MONTANA SENATE
1997 LEGISLATURE
BUSINESS AND INDUSTRY COMMITTEE

ROLL CALL DATE 1-29-97

| NAME | PRESENT | ABSENT | EXCUSED |
|---|---|---|---|
| WILLIAM CRISMORE | X | | |
| CASEY EMERSON | X | | |
| BEA MC CARTHY | X | | |
| DEBBIE SHEA | X | | |
| STEVE BENEDICT, VICE CHAIRMAN | X | | |
| JOHN HERTEL, CHAIRMAN | X | | |
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# MINUTES

## MONTANA HOUSE OF REPRESENTATIVES
## 55th LEGISLATURE - REGULAR SESSION

## COMMITTEE ON BUSINESS & LABOR

**Call to Order:** By CHAIRMAN BRUCE SIMON, on March 21, 1997, at 8:00 AM, in Room 104.

### ROLL CALL

**Members Present:**

Rep. Bruce T. Simon, Chairman (R)
Rep. Paul Sliter, Vice Chairman (Majority) (R)
Rep. Robert J. "Bob" Pavlovich, Vice Chairman (Minority) (D)
Rep. Joe Barnett (R)
Rep. Rod Bitney (R)
Rep. Charles R. Devaney (R)
Rep. David Ewer (D)
Rep. Kim Gillan (D)
Rep. Billie Krenzler (D)
Rep. Bob Lawson (R)
Rep. Rod Marshall (R)
Rep. Gay Ann Masolo (R)
Rep. Wes Prouse (R)
Rep. Carolyn M. Squires (D)
Rep. Jay Stovall (R)
Rep. Cliff Trexler (R)
Rep. Joe Tropila (D)
Rep. Carley Tuss (D)

**Members Excused: Rep. Bookout (R)**

**Members Absent:** None

**Staff Present:** Stephen Maly, Legislative Services Division
Pati O'Reilly, Committee Secretary

**Committee Business Summary:**

Hearing(s) & Date(s) Posted: SB 113; SB 190; SB 239; SB 246; SR 5 (2/25/97)
Executive Action: SB 246; SB 239; SB 193; SB 113; SJR 5; SB 275; SB 276

## HEARING ON SJR 5

**Opening Statement by Sponsor**: **Senator Aklestad,** S. D. 44 introduced SJR 5.
*{Tape: 1; Side: 1; Approx. Time Count: 1.8; Comments: None.}*

**Proponents' Testimony**: None

**Opponents' Testimony**:None

**Informational Testimony**:
**Sue Mohr, JTPA - EXHIBIT 1.**
*{Tape: 1; Side: 1; Approx. Time Count: 5.9; Comments: None.}*

**Questions From Committee Members and Responses**:
*{Tape: 1; Side: 1; Approx. Time Count: 13.5; Comments: None.}*

**Closing by Sponsor**: **Senator Aklestad** closed. **Rep. Bergsagel** to carry.
*{Tape: 1; Side: 1; Approx. Time Count: 22.5; Comments: None.}*

## HEARING ON SB 113

**Opening Statement by Sponsor**: **Sen. McCarthy,** S. D. 29 introduced the bill.
*{Tape: 1; Side: 1; Approx. Time Count: 24.5; Comments: None.}*

**Proponents' Testimony**:
**Frank Cote, Dept. Commissioner Mt Insurance Division, State Auditor.**
*{Tape: 1; Side: 1; Approx. Time Count: 25.8; Comments: None.}*

**Larry Akey, Natl. Assn. of Independent Insurers**
*{Tape: 1; Side: 1; Approx. Time Count: 28.1; Comments: None.}*

**Roger McGlenn, IIAM**
*{Tape: 1; Side: 1; Approx. Time Count: 28.9; Comments: None.}*

**Susan Good, MT Assn. of Life Underwriters**
*{Tape: 1; Side: 1; Approx. Time Count: 29.2; Comments: None.}*

**Opponents' Testimony**: None

**Questions From Committee Members and Responses**:
*{Tape: 1; Side: 1; Approx. Time Count: 29.8; Comments: None.}*

**Closing by Sponsor**: **Sen. McCarthy** closed. **Rep. Tropila** to carry.
*{Tape: 1; Side: 1; Approx. Time Count: 29.8; Comments: None.}*

## EXECUTIVE ACTION ON SB 113

**Motion/Vote**: **Rep. Ewer** moved do concur SB 113. Motion carried 16-0. **Rep. Bitney, Tuss and Squires** absent.
*{Tape: 1; Side: 2; Approx. Time Count: .01; Comments: None.}*

## EXECUTIVE ACTION ON SJR 5

**Motion**: **Rep. Stovall** moved do concur SJR 5.
*{Tape: 1; Side: 2; Approx. Time Count: .5; Comments: None.}*

**Motion/Vote**: **Rep. Krenzler** moved to adopt Krenzler motion. Motion passed 14-0. **Reps. Simon and Sliter voted no. Reps. Bitney, Squires and Tuss absent.**
*{Tape: 1; Side: 2; Approx. Time Count: .8; Comments: None.}*

**Motion/Vote**: **Rep. Sliter** moved do concur as amended. Motion passed 16-0. **Reps. Bitney, Squires and Tuss** absent.
*{Tape: 1; Side: 2; Approx. Time Count: 3.7; Comments: None.}*

## HEARING ON SB 190

**Opening Statement by Sponsor**: **Senator Lynch,** S. D. 19 introduced the bill.
*{Tape: 1; Side: 1; Approx. Time Count: 4.7; Comments: None.}*

**Proponents' Testimony**:
**Senator Gage, SD 13**
*{Tape: 1; Side: 2; Approx. Time Count: 9.4; Comments: None.}*

**Tom Ebzery, St. Vincent's Hospital. EXHIBITS 2 AND 3.**
*{Tape: 1; Side: 2; Approx. Time Count: 11.6; Comments: None.}*

**Keith Colbo, Deaconess Hospital and Billings Clinic**
*{Tape: 1; Side: 2; Approx. Time Count: 16.4; Comments: None.}*

**Chuck Butler, Blue Cross and Blue Shield**
*{Tape: 1; Side: 2; Approx. Time Count: 17.3; Comments: None.}*

**Tom Hopgood, Health Insurers of American**
*{Tape: 1; Side: 2; Approx. Time Count: 21.0; Comments: None.}*

**Opponents' Testimony**:
**Rep. David Ewer,** H. D. 33
*{Tape: 1; Side: 2; Approx. Time Count: 22.5; Comments: None.}*

# HOUSE STANDING COMMITTEE REPORT

March 21, 1997



Mr. Speaker: We, the committee on **Business and Labor** report that **Senate Bill 113** (third reading copy -- blue) **be concurred in**.

Signed: _____
*Bruce Simon, Chair*

**Carried by: Rep. Tropila**

3/21

Committee Vote:
Yes 16, No 0.

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HOUSE OF REPRESENTATIVES

BUSINESS AND LABOR COMMITTEE

ROLL CALL DATE 3/21/97

| NAME | PRESENT | ABSENT | EXCUSED |
|---|---|---|---|
| | | | |
| Bruce Simon, Chairman | ✓ | | |
| Paul Sliter Vice Chairman | ✓ | | |
| Bob Pavlovich, Vice Chairman | ✓ | | |
| Joe Barnett | ✓ | | |
| Rod Bitney | ✓ | X | |
| Sylvia Bookout | | | ✓ |
| Charles Devaney | ✓ | | |
| David Ewer | ✓ | | |
| Kim Gillan | ✓ | | |
| Billie Krenzler | ✓ | | |
| Bob Lawson | ✓ | | |
| Rod Marshall | ✓ | | |
| Gay Ann Masolo | ✓ | | |
| Wes Prouse | ✓ | | |
| Carolyn Squires | ✓ | | |
| Jay Stovall | ✓ | | |
| Cliff Trexler | ✓ | | |
| Joe Tropila | ✓ | | |
| Carley Tuss | ✓ | X | |
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